N/Dee

ena un			JET FAX			'p.'1'
લુક	OIPE	PART	B - FEE(S) TRAN	SMITTAL		
Complete and s	end this form, tope	ther with applicabl			PID	
ten .	1	0, 1		Commissioner for P	e e. Patents	
13	FEB 12	(بنا 2008		P.O. Box 1450 Mexandria, Virgini	n 22313-1458	
<u>.</u>	\\$	<i>(</i> */	or <u>Fax</u> (571)-273-2885		
). Blocks I through 5 at be mailed to the current d'or (b) indicating a sepa	
		Block I for any change of address	F	lote: A certificate of marce(s) Transmittal. This conspers. Each additional passes its own certificate of	ling can only be used for crifficate cannot be used for per, such as an assignment mailing or transmission.	r domestic mailings of to or any other accompanyl at or formal drawing, ma
27127 TARTMAN A	7590 12/2 L HARTMAN, P.(7/2007 C		Certific	rate of Mailing or Trans	mlerion
552 EAST 700		- .	ı S	hereby certify that this F tates Postal Service with	ec(s) Transmittal is being sufficient postage for firs op ISSUE FEE address	deposited with the Unit t class mail in an envelo
VALPARAISO			8: 1:	ddressed to the Mail St ansmitted to the USPTO	op ISSUE PEE address (571) 273-2885, on the da	above, or being facsimate indicated below.
				Gavle L. Pietr		(Depositor's nem
			ŀ		uta	(Signatus
E.B	•		Ţ	A -	008	(Dat
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT			
10/709,782	05/27/2004			[2]	TORNEY DOCKET NO.	CONFIRMATION NO.
7		OD FOR DETECTING	Douglas Ray Sparks	AICAL AND BIOLOGIC	IFP-24	3781
			MIND TREATHER CREA		AL AUDNIS	
	•					•
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	B PREV. PAID ISSUE PE	E TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	02	\$1020	03/27/2008
EXAM	4TNED	APTIDIT	T		31020	4374772006
		ART UNIT	CLASS-SUBCLASS	٠ .		
	CATHERINE	3767	604-131000			
EK 1.363).	ence address or indication	•	1	patent front page, list	Hartman	& Hartman, P.C
			(f) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
Address from PTO/SI	ondence address (or Cha B/122) attached.	nge of Correspondence				Hartman
Address form PTO/SI	ication for "Fee Address"	Indication form	(2) the name of a sin	gle firm (having as a mer	nbera 2 Gally M.	
"Fee Address" ind PTO/SB/47; Rev 03-0	ication (or "Fee Address" 12 or more recent) attach	Indication form	(2) the name of a sin	gle firm (having as a mer agent) and the names of torneys or agents. If no na	nbera 2 Gally M.	Hartman a N.S. Hartman
PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address" 12 or more recent) attach	Indication form cd. Use of a Customer	(2) the name of a sin registered attorney of 2 registered patent at listed, no name will b	gle firm (having as a mer agent) and the names of torneys or agents. If no no e printed,	nbera 2 Gally M.	
PTO/SB/47; Rev 03-0 Number is required. ASSIGNEE NAME A	ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA	Indication form icd. Use of a Customer TO BE PRINTED ON	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will b IHE PATENT (print or t	gle firm (having as a mer ragent) and the names of torneys or agents. If no no e printed,	nbera 2 Gary M. Fup to ame is 3 Domenica	a N.S. Hartmar
PU "Fee Address" ind PTOYSB47; Rev 03-0 Number is required. ASSIGNEE NAME A PLEASE NOTE: Uni recordation as set fort	ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignce is identi b in 37 CFR 3.11. Comp	Indication form icd. Use of a Customer TO BE PRINTED ON	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will be the PATENT (print or t data will appear on the T a substitute for filing a	gle firm (having as a mer ragent) and the names of corneys or agents. If no no e printed, type) patent. If an assignee is assignment.	nber a 2 Cary M. Tup to a 1 Domenic a 2 Domenic a 1 Do	a N.S. Hartmar
PTOYSH47; Rev 03-0; Number is required. ASSIGNEE NAME A PLEASE NOTE: Uni- recordation as set fort. (A) NAME OF ASSIG	ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA tess an assignce is identi b in 37 CFR 3.11. Comp GNEE	Indication form and Use of a Customer TO BE PRINTED ON fined below, no assignce pletion of this form is NO	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will b IHE PATENT (print or t data will appear on the T a substitute for filing at (B) RESIDENCE; (CIT	gle firm (having as a mer agent) and the names of torneys or agents. If no me printed, ype) patent. If an assignee is assignment. Y and STATE OR COUNTY	nber a 2 Cary M. Tup to a 1 Domenic a 2 Domenic a 1 Do	a N.S. Hartmar
PTOYSB47; Rev 03-0; Number is required. ASSIGNEE NAME A PLEASE NOTE: Uni- recordation as set fort (A) NAME OF ASSIG	ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignce is identi b in 37 CFR 3.11. Comp	Indication form and Use of a Customer TO BE PRINTED ON fined below, no assignce pletion of this form is NO	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will be the PATENT (print or t data will appear on the T a substitute for filing a	gle firm (having as a mer agent) and the names of torneys or agents. If no me printed, ype) patent. If an assignee is assignment. Y and STATE OR COUNTY	nber a 2 Cary M. Tup to a 1 Domenic a 2 Domenic a 1 Do	a N.S. Hartmar
PTOYSB47; Rev 03-C PTOYSB47; Rev 03-C Number is required. ASSIGNEE NAME A PLEASE NOTE: Uni- recordation as set fort (A) NAME OF ASSIG Integrated	ication (or "Fee Address" 12 or more recent) attach ND RESIDENCE DATA case an assignce is identi b in 37 CFR 3.11. Comp GNEE d Sensing Syst	TO BE PRINTED ON ified below, no assignce oldino of this form is NO	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will be THE PATENT (print or t data will appear on the T a substitute for filing at (B) RESIDENCE: (CIT YPSILANTI,	gle firm (having as a mer agent) and the names of corneys or agents. If no note printed. The printed of the pr	nber a 2 Cary M. Tup to a 1 Domenica identified below, the doc NTRY)	a N.S. Hartman
PTOYSB47; Rev 03-0 PTOYSB47; Rev	ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA ess an assignce is identi b in 37 CFR 3.11. Comp GNEE GI Sensing Syst inter assignce category or	Indication form ed. Use of a Customer TO BE PRINTED ON filed below, no assignce election of this form is NO tems. Inc. categories (will not be presented)	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will be THE PATENT (print or t data will appear on the T a substitute for filing at (B) RESIDENCE: (CIT YPSILanti, inted on the patent):	gle firm (having as a mer agent) and the names of torneys or agents. If no not printed. The printed of the names of torneys or agents. If an assignment is a sasignment. The printed of the names of torneys or assignment. The printed of the names of torneys or agents of the names of the na	nber a 2 CGTY PI- rup to 3 Domenica identified below, the doc NTRY) Blion or other private group	a N.S. Hartman
PTOYSB47; Rev 03-CPTOYSB47; Re	ication (or "Fee Address" 12 or more recent) attach ND RESIDENCE DATA less an assignce is identi is in 37 CFR 3.11. Comp GNEE GI Sensing Syst iate assignce category or are submitted:	* Indication form ed. Use of a Customer A TO BE PRINTED ON ified below, no assignce election of this form is NO tems, Inc. categories (will not be pr	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will be THE PATENT (print or t data will appear on the T a substitute for filing at (B) RESIDENCE: (CIT YPSILanti, inted on the patent):	gle firm (having as a mer agent) and the names of torneys or agents. If no not printed. The printed of the names of torneys or agents. If an assignment is a sasignment. The printed of the names of torneys or assignment. The printed of the names of torneys or agents of the names of the na	nber a 2 Cary M. Tup to a 1 Domenica identified below, the doc NTRY)	a N.S. Hartmar
PTOYSB47; Rev 03-0; PTOYSB	ication (or "Fee Address" 12 or more recent) attach ND RESIDENCE DATA less an assignce is identi is in 37 CFR 3.11. Comp GNEE GI Sensing Syst interassignce category or are submitted: o small entity discount p	* Indication form ed. Use of a Customer A TO BE PRINTED ON ified below, no assignce election of this form is NO tems, Inc. categories (will not be pr	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will be the PATENT (print or t data will appear on the T a substitute for filing at (B) RESIDENCE: (CIT YPSilanti, inted on the patent):	gle firm (having as a mer agent) and the names of torneys or agents. If no note printed. ype) patent. If an assignee is a assignment. Y and STATE OR COUNMICHIGAN Individual Corporates first reapply any product.	nber a 2 Cerry M. True to ame is 3 Domenica identified below, the doc NTRY) ation or other private group evicusty paid issue fee the	a N.S. Hartman
PTO/SB/47; Rev 03-0; PTO/SB/47	ication (or "Fee Address" 12 or more recent) attach ND RESIDENCE DATA less an assignce is identi is in 37 CFR 3.11. Comp GNEE GI Sensing Syst interassignce category or are submitted: o small entity discount p	* Indication form ed. Use of a Customer A TO BE PRINTED ON ified below, no assignce election of this form is NO tems, Inc. categories (will not be pr	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will be the PATENT (print or t data will appear on the T a substitute for filing at (B) RESIDENCE: (CIT YPSilanti, inted on the patent):	gle firm (having as a mer agent) and the names of torneys or agents. If no note printed. ype) patent. If an assignee is a assignment. Y and STATE OR COUNMICHIGAN Individual Corporates first reapply any product.	nber a 2 Cerry M. True to ame is 3 Domenica identified below, the doc NTRY) ation or other private group evicusty paid issue fee the	a N.S. Hartman
PTOVSB47: Rev 03-0 PTOVSB47: Rev 03-0 PTOVSB47: Rev 03-0 PTOVSB48: Rev 03-0 PTOVSB48: Rev 03-0 PTOVSB48: Rev 03-0 PTOVSB48: Rev 03-0 PLEASE NOTE: Universe to forter (A) NAME OF ASSIGNATION OF ASSIGNATI	ication (or "Fee Address" 12 or more recent) attach ND RESIDENCE DATA les an assignee is identi be in 37 CFR 3.11. Comp GNEE GI Sensing Syst attact assignee category or are submitted: o small entity discount po of Copies Ten us (from status indicated)	* Indication form ed. Use of a Customer A TO BE PRINTED ON ified below, no assignce election of this form is NO Dems, Inc. categories (will not be pre- ermitted)	(2) the name of a sin registered attorney or 2 registered attorney or 2 registered patent at listed, no name will be the patent of the patent of the T a substitute for filing at (B) RESIDENCE: (CIT YPSILANTI, inted on the patent): D. Payment of Pec(s): (Pic Payment of Pec(s): (Pic Payment by credit or the Director is berefoverpayment, to Dep	gle firm (having as a mer agent) and the names of torneys or agents. If no nice printed. ype) patent. If an assignee is assignment. Y and STATE OR COUNMICHIGAN Individual Corponerse first reapply any product. Form PTO-2038 is at y authorized to charge the osit Account Number	identified below, the doc NTRY) ation or other private group evicousty paid issue fee the tached. Executive fee(s), any defice (enclose an electrose an electr	entity Government own above)
PTOYSB47: Rev 03-0 PTOYSB47: Rev 03-0 PTOYSB47: Rev 03-0 PTOYSB48: Rev 03-0 PTOYSB48: Rev 03-0 PTOYSB48: Rev 03-0 PLEASE NOTE: Universe to fort (A) NAME OF ASSIGNATION INTEGRATE: Lasse check the appropriate of the same fee Publication fee (N) Advance Order - g Change in Entity Stat a. Applicant claims	ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identified in 37 CFR 3.11. Comp GNEE of Sensing Systimate assignee category or are submitted: o small entity discount por of Copies Ten us (from status indicated s SMALL ENTITY status	* Indication form ed. Use of a Customer A TO BE PRINTED ON ified below, no assignce election of this form is NO Dems, Inc. categories (will not be pre- ermitted) above) s. Soc 37 CFR 1.27.	(2) the name of a sin registered attorney or 2 registered attorney or 2 registered patent at listed, no name will be the patent of the patent of the patent of the patent of the patent; (CII YPSILANTI, inted on the patent): Payment of Fee(s): (Pte. Payment by credit or the Director is hereboverpayment, to Dep. D. Applicant is no too.	gle firm (having as a mer agent) and the names of torneys or agents. If no nice printed. ype) patent. If an assignee is a assignment. Y and STATE OR COUNTICALIGATE Individual Corporates first reapply any product from PTO-2038 is at any authorized to charge the osit Account Number.	identified below, the doc NTRY) ation or other private ground action of other private ground evices by paid issue fee the tached. Sequipped fee(s), any defice the conclusion and concl	pentity Government own above)
PI "Fee Address" ind PTO/SB/47; Rev 03-6 Number is required. ASSIGNEE NAME A PLEASE NOTE: Unit recordation as set fort (A) NAME OF ASSIG Integrated lesse check the appropria. The following foc(s): Advance Order - fi Change in Entity Stat La Applicant claims OTE: The Issue Foe and chest as shown by the n	ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identified in 37 CFR 3.11. Comp GNEE of Sensing Systimate assignee category or are submitted: o small entity discount por of Copies Ten us (from status indicated s SMALL ENTITY status	* Indication form ed. Use of a Customer A TO BE PRINTED ON ified below, no assignce election of this form is NO Dems, Inc. categories (will not be pre- ermitted) above) s. Soc 37 CFR 1.27.	(2) the name of a sin registered attorney or 2 registered attorney or 2 registered patent at listed, no name will be the patent of the patent of the patent of the patent of the patent; (CII YPSILANTI, inted on the patent): Payment of Fee(s): (Pte. Payment by credit or the Director is hereboverpayment, to Dep. D. Applicant is no too.	gle firm (having as a mer agent) and the names of torneys or agents. If no nice printed. ype) patent. If an assignee is a assignment. Y and STATE OR COUNTICALIGATE Individual Corporates first reapply any product from PTO-2038 is at any authorized to charge the osit Account Number.	identified below, the doc NTRY) ation or other private ground action of other private ground evices by paid issue fee the tached. Sequipped fee(s), any defice the conclusion and concl	pentity Government cown above)
PTOYSEAT; Rev 03-C. Number is required. ASSIGNEE NAME A PLEASE NOTE: Universely the recordation as set fort. (A) NAME OF ASSIGNEE Check the appropriate of the second of t	ication (or "Fee Address" 12 or more recent) attach 12 or more recent) attach 13 or more recent) attach 14 less an assignee is identified in 37 CFR 3.11. Comp 15 Sensing Syst 16 Sensing Syst 16 sensing Syst 16 are submitted: 17 of Sensing Syst 18 of Copies Ten 18 of Copies Ten 19 of Copies Ten 19 of Copies Ten 19 of Copies Ten 19 United State 10 Publication Fee (if requirecords of the United State	Indication form and Use of a Customer A TO BE PRINTED ON iffed below, no assignce election of this form is NO terms. Inc. categories (will not be premitted) I above) a Soc 37 CFR 1.27. ired) will not be accepted a Patent and Trademark Mullimote be accepted a Patent and Trademark	(2) the name of a sin registered attorney or 2 registered attorney or 2 registered patent at listed, no name will be the patent of the patent of the patent of the patent of the patent; (CII YPSILANTI, inted on the patent): Payment of Fee(s): (Pte. Payment by credit or the Director is hereboverpayment, to Dep. D. Applicant is no too.	gle firm (having as a mer agent) and the names of torneys or agents. If no nice printed. ype) patent. If an assignee is a assignment. Y and STATE OR COUNTICALIGATE Individual Corporates first reapply any product from PTO-2038 is at any authorized to charge the osit Account Number.	identified below, the doc NTRY) attion or other private groun evicustly paid issue fee the tached. sequiped fec(s), any defice (enclose an entry status. See 37 CFR attorney or agent; or the instance of the security status.	pentity Government own above)
PI "Fee Address" ind PIONSB47; Rev 03-6 PIONSB47; Rev 03-6 Number is required. ASSIGNEE NAME A PILEASE NOTE: Unit- recordation as set fort (A) NAME OF ASSIG Integrated a. The following fec(s) a lesse check the appropria. The following fec(s) a lesse fee Publication Fee (N Advance Order - a Change in Entity Stat (Change in Entity Stat (Cha	ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identified in 37 CFR 3.11. Comp GNEE of Sensing Systimate assignee category or are submitted: o small entity discount por of Copies Ten us (from status indicated s SMALL ENTITY status	Indication form and Use of a Customer A TO BE PRINTED ON iffed below, no assignce election of this form is NO terms. Inc. categories (will not be premitted) I above) a Soc 37 CFR 1.27. ired) will not be accepted a Patent and Trademark Mullimote be accepted a Patent and Trademark	(2) the name of a sin registered attorney or 2 registered attorney or 2 registered patent at listed, no name will be the patent of the patent of the patent of the patent of the patent; (CII YPSILANTI, inted on the patent): Payment of Fee(s): (Pte. Payment by credit or the Director is hereboverpayment, to Dep. D. Applicant is no too.	gle firm (having as a mer agent) and the names of torneys or agents. If no nice printed. ype) patent. If an assignee is a assignment. Y and STATE OR COUNTICALIGATI Individual Corporates first reapply any product from PTO-2038 is at any authorized to charge the osit Account Number.	identified below, the doc NTRY) ation or other private group evicusty paid issue fee sh tached. Sequiped fee(s), any defic (enclose an of NTITY status. See 37 CFR I attorney or agent; or the of	pentity Government come above)
PTO/SB/47; Rev 03: PTO/SB/47; Rev 03: PTO/SB/47; Rev 03: PLEASE NOTE: Uniterconduction as set forth. (A) NAME OF ASSIGNED ASS	ication (or "Fee Address" 12 or more recent) attach 12 or more recent) attach 13 or more recent) attach 14 cas an assignee is identified in 37 CFR 3.11. Comp 15 CFR 3.11. Comp 16 Sensing Syst 16 Sensing Syst 16 sensing Syst 17 cas a session of series of series at the session of series of series at the series of comparate series at the United State 16 publication Fee (if required of the United State 17 cas a series of the United State 18 publication Fee (if required of the United State 19 comparate of the United State 10 comparate of the United State 10 comparate of the United State 10 co	Indication form and Use of a Customer A TO BE PRINTED ON ified below, no assignce election of this form is NO Tems, Inc. categories (will not be pre- ermitted) I above) Soc 37 CFR 1.27. irred) will not be accepted as Patent and Trademark Hartman	(2) the name of a sin registered attorney or 2 registered patent at listed, no name will be the patent of the patent; (CIT YPSILANTI, inted on the patent): Payment of Fec(s): (Pte A check is enclosed. Payment by credit or Merchanti to Dep b. Applicant is no lond from anyone other than Office.	gle firm (having as a mer agent) and the names of torneys or agents. If no not eprinted. ypc) patent. If an assignee is a assignment. Y and STATE OR COUP Michigan Individual Corporates first reapply any product form PTO-2038 is any authorized to charge the osit Account Number DataFebruary Registration No.	identified below, the doc NTRY) ation or other private group eviously paid issue fee sh ttached. Sequiped fee(s), any defice ttached. NTITY status. See 37 CFR I attorney or agent; or the second sec	p entity Government own above) ciency, or credit any extra copy of this form). 1.27(g)(2). assignee or other party in
PTOVSB47; Rev 03-0; PTOVSB47; PTOVSB	ication (or "Fee Address' 12 or more recent) attach 12 or more recent) attach 12 or more recent) attach 13 or more recent) attach 14 or more recent) attach 15 or more recent 15 or more resubmitted: 16 or more recent) attach 16 or more resubmitted: 17 or more recent yest indicated attach 16 or more recent points attach 17 or more recent points attach 17 or more recent points attach 18 or more recent) attach 18 or more recent points attach 18	Indication form ed. Use of a Customer A TO BE PRINTED ON iffed below, no assignce election of this form is NO categories (will not be propertied) Categories (will not be propertied) Cabove) Soc 37 CFR 1.27. Carred) will not be accepted and Trademark Hartman FR 1.311. The information U.S.C. 122 and 37 CFR 1.27. USPTO. Time will very ien, should be sent to the NOT SEND FEES OR C	(2) the name of a sin registered attorney of 2 registered patent at 2 registered patent at listed, no name will be the PATENT (print or t data will appear on the T a substitute for filing a (B) RESIDENCE: (CIT YPSilanti, inted on the patent): Description of Pec(s): (Pta A check is enclosed. Payment of Pec(s): (Pta D Payment by credit or Expansion of the Director is hereb overpayment, to Deput D b. Applicant is no to from anyone other than Office.	gle firm (having as a mer agent) and the names of torneys or agents. If no not provided in the names of torneys or agents. If no not provided in the names of torneys or agents. If no not provided in the names of torneys or assignment. Y and STATE OR COUP Michigan Individual Corporates first reapply any provided in the name of	identified below, the doc NTRY) ation or other private group evicusty paid issue fee sh tached. Sequiped fee(s), any defic (enclose an of NTITY status. See 37 CFR I attorney or agent; or the of	p entity